Form of application for the Post of Lady Medical Probationers.

To

The Secretary,

Mysore Public Service

Commission, "Ballabrooie"

Palace Road, High Grounds,

Bangalore.

Sir,

In response to the advertisement in the *Mysore Gazette*, dated.....inviting applications for recruitment of Lady Medical Probationers to the Medical Department, I beg to submit this, my application in five sets. I declare that the particulars contained herein are true and correct.

Yours faithfully,

Dated.....

Place.....

Applicant.

1 (a) Name in full (block letters) ... .
(b) Sex ... .
2 Postal Address ... .
3 Father's or Guardian's name and occupation ... .
4 Religion, Caste and Community ... .
5 Date of birth and age, last birthday. .....
6 Nature of evidence produced as to the correctness of the date of birth given. An extract of the S.S.L.C. certificate regarding age duly signed by a Gazetted Officer also to be attached ... .
7 Place of birth, District and State ... .
8 Whether Mysorean by birth or domicile. In the latter case, whether a certificate from a Gazetted Officer showing the total period of residence has been enclosed. ... .
9 Whether you know how to speak, read and write Kannada ... .
10 Educational particulars :—
(a) Secondary or High Schools :—

Name of the Institution (s)	Date (s) of entering	Date (s) of leaving
1.....	.....	.....
2.....	.....	.....
3.....	.....	.....

(b) University or Universities or other places of higher education attended ;

Name of University, etc.	College, if any	Date of entering	Date of leaving
1.....	.....	.....	.....
2.....	.....	.....	.....
3.....	.....	.....	.....

11 S.S.L.C. or its equivalent :—
(a) Date of passing, Class and Rank obtained. (a).....
(b) No. and year(s) of attempts made to pass the examination. (b).....
(c) A copy of certificate of marks obtained in each subject and total duly attested by a Gazetted Officer. (c).....
12 Intermediate Examination :—
(a) Date of passing, Class and Rank obtained. (a).....
(b) Subjects offered in the examination. (b).....
(c) Marks obtained in each subject and total (a copy of the certificate duly attested by a Gazetted Officer,) (c).....
(d) Whether passed at the first attempt ; if not, the number and year (s) of attempts made to pass the examination in all the parts or each of them. (d).....
13 Degree and other higher examinations (non-technical) :—
(a) Date of passing, Class, Rank and Medals obtained. (a).....
(b) Subjects offered for the examination. (b).....
(c) Marks obtained in each subject and total (copies of certificates duly attested by a Gazetted Officer to be attached). (c).....
(d) Whether passed at the first attempt, if not the number and year(s) of attempts made to pass the examination in all the parts or each of them. (d).....
14 (i) Technical Qualifications.—(M.B.B.S) or its equivalent.
(a) Technical qualifications with names of Institutions attended with dates and if you have any practical experience, give full particulars of period of work with dates. (a).....
(b) Date of passing, Class, Rank and Medals obtained. (b).....
(c) Subjects offered ... (c).....
(d) Marks obtained (a certified copy of the certificate to be attached) (d).....
(e) No. of attempts made to pass the examination (s). (e).....
14 (ii) Higher Technical Qualifications, if any. Particulars as in (a) to (e) in 14 (i) above may be furnished. .....
15 Research and other papers or books published ... .
16 Any other claim that the candidate wishes to state in support of her application for the post ... .
17 Sports, Social Work and other extra curricular activities, if any ... .
18 Charactor and antecedant as testified to be :—
(a) the Principal of the College or Institute. (a).....
(b) two other leading and responsible gentlemen. (b).....
19 Whether now in service and if so where and in what capacity and present pay with grade (length of unbroken service to be mentioned with details). A certificate regarding conduct and work from the superior officer to be attached ... .
20 Whether you have undergone House Surgency. If so, a certificate from the concerned authority showing the total period of practical training you have undergone and the places where you have undergone the training may be enclosed ... .
21 Whether you are a private Medical Practitioner, and if so, the number of years of practice you have got.. .....
22 Physical fitness :—
(a) Height ... (a).....
(b) Chest measurement ... (b).....
(c) Weight ... (c).....
(d) Eye Sight ... (d).....
(e) Whether in sound health ... (e).....
(f) Whether free from infectious diseases. (f).....
(g) Physical deformities or defects. A certified copy of Physical fitness from a Medical Officer not below the rank of a Surgeon or from a District Medical Officer, or a Medical Practitioner of equal status, should be attached. (g).....
23 Have you ever been removed, debarred or dismissed from Government employment or excluded from appearing for any examination ... .
24 State the name of Treasury/Post Office from which you submit a Treasury Receipt/Crossed Postal Order and the number and date of the Treasury Receipt/Crossed Postal Order ... .

25 Name of Treasury/Post Office.	Number of Treasury Receipt/Crossed Postal Order.	Date	Value Rs. As. Ps.
.....	.....	.....	.....

26 Give a list of the documents attached to the application (copies should also be attached where asked for). ... 1..... 2..... 3..... 4..... 5.....

For the use of Government Servants only.

(Certificate by official superior)

Forwarded to the Secretary, Mysore Public Service Commission, Bangalore.

Certified that.....holds substantively a Permanent/Temporary post under the State Government as..... having been appointed thereto regularly under the rules of recruitment/as a local candidate. Her work and character so far as known to me have been/are good. She is also permitted to apply for the post sought for.

Signature.....

Designation.....

Department.....

Date.....

Place.....

2385